



CUSTOMER USE ONLY
FROM: (PLEASE PRINT)

PHONE 512 214 0883

Edwin A. Serrano
1305 Plantation Park Cir.
Apt. 1022
Orlando, FL 32821

DELIVERY OPTIONS (Customer Use Only)

SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

Delivery Options

- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery Required (additional fee, where available)
- 10:30 AM Delivery Required (additional fee, where available)

*Refer to USPS.com® or local Post Office® for availability.

TO: (PLEASE PRINT)

PHONE ()

Clerk's office
United States Court Office
Room 150 Federal Building
San Juan, PR
00918-1767

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 Insurance included.

PEEL FROM THIS CORNER



USPS.COM/PICKUP



EJ 754 608 535 US

PAYMENT BY ACCOUNT (if applicable)			
USPS® Corporate Acct. No.	Federal Agency Acct. No. or Postal Service™ Acct. No.		
ORIGIN (POSTAL SERVICE USE ONLY)			
<input type="checkbox"/> 1-Day <input type="checkbox"/> 2-Day <input type="checkbox"/> Military <input type="checkbox"/> DPO			
PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage	
34741	4-14-2021	\$26.35	
Date Accepted (MM/DD/YY)	Scheduled Delivery Time	Insurance Fee	COD Fee
4-13-2021	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input type="checkbox"/> 12 NOON	\$	\$
Time Accepted	10:30 AM Delivery Fee	Return Receipt Fee	Live Animal Transportation Fee
10:30 AM	\$	\$	\$
Special Handling/Fragile	Sunday/Holiday Premium Fee	Total Postage & Fees	
\$	\$	\$26.35	
Weight	<input type="checkbox"/> Flat Rate	Acceptance Employee Initials	
1.10	OP	\$	
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY)	Time	Employee Signature	
	<input type="checkbox"/> AM <input type="checkbox"/> PM		
Delivery Attempt (MM/DD/YY)	Time	Employee Signature	
	<input type="checkbox"/> AM <input type="checkbox"/> PM		

LABEL 11-B, MARCH 2019

PSN 7690-02-000-9996

O S



1007



00918

U.S. POSTAGE PAID
PME 1-Day
KISSIMMEE, FL
34741
APR 13, 21
AMOUNT

\$26.35
R2305E124481-12

INTERNATIONAL USE
G LABEL HERE

*

+

.

equest.

APO/FPO/DPO, and select International
usps.com for complete details.

ations only.

WHEN USED INTERNATIONALLY, A CUSTOMS DECLARATION LABEL MAY BE REQUIRED.

